

SCHOOL & WORK TEMPLATES

Workplace Accommodation Request

Template letter for requesting ADA accommodations from your employer. Customize fields in [brackets] before submitting to HR.

Know your rights: Under the Americans with Disabilities Act (ADA), employers with 15+ employees must provide reasonable accommodations for qualified employees with disabilities — unless it causes undue hardship. You are not required to disclose a specific diagnosis, only your functional limitations.

[Today's Date]

[HR Manager's Name] [HR Department] [Company Name] [Company Address]

RE: Request for Reasonable Accommodation Under the Americans with Disabilities Act

Dear [HR Manager's Name or "Human Resources"],

I am writing to formally request a reasonable accommodation under the Americans with Disabilities Act (ADA). I have a medical condition that qualifies as a disability under the ADA, as it substantially limits [list affected major life activities, e.g., "concentrating, walking, caring for myself, and working"].

To perform the essential functions of my position as [Your Job Title], I am requesting the following accommodations:

- Flexible start/end times to accommodate medical appointments and fatigue patterns [specify: e.g., start between 9–10 AM]
- Permission to work remotely [full-time / X days per week] when symptoms are severe
- Reduced or modified travel requirements
- Permission to take short rest breaks during the workday as needed
- Ergonomic workstation modifications: [specify: e.g., standing desk, ergonomic chair, wrist supports]
- Modified schedule or reduced workload during acute flares [specify arrangement]
- Leave under FMLA for medical appointments and treatment
- Other: [describe any other specific need]

I am happy to provide medical documentation from my healthcare provider if required. I am committed to fulfilling my job responsibilities and believe these accommodations will allow me to continue to perform my role effectively.

I would welcome the opportunity to meet and discuss this request at your convenience. Please confirm receipt and advise on next steps in the interactive process. I can be reached at [Phone] or [Email].

Sincerely,

[Your Full Name] [Department] [Employee ID, if applicable] [Phone] [Email]

Keep a copy of this letter. Document all communications. If your request is denied, you have the right to appeal and may wish to consult an employment attorney. More guidance at projectlyme.org/support/school-and-work/